

PROVIDER NEWSLETTER

Volume 2, Issue 3

Keeping Providers Informed

Summer, 2000

CHECKING FOR MEDICAID ELIGIBILITY

The following are different ways to verify Medicaid eligibility.

• FAXBACK 1-800-714-0075

Using a touch tone phone, enter your provider number, the client's social security number, and the dates of eligibility you are questioning. As long as you are registered to use the FAXBACK program (Consultec needs your fax number), you will receive a fax at your office within a few minutes. The fax will provide information about the client's eligibility, if they have Full or Basic Medicaid, if they have private insurance and, if so, who that carrier is. To sign up for the FAXBACK program, in-state providers can contact Consultec at 1-800-624-3958. Out-of-state and Helena area providers may contact Consultec at (406) 442-1837.

• VOICE RESPONSE 1-800-714-0060

Using a touch tone phone, enter your provider number, the client's social security number, and dates of service you are checking. A computerized voice will respond with the information you are seeking. Consultec administers this program.

• **CONSULTEC PROVIDER RELATIONS 1-800-624-3958** or **406-442-7278** for Helena area and for out of state providers.

• MEPS http://vhsp.dphhs.state.mt.us

By logging onto the internet website for DPHHS, you can access recipient eligibility and claims status history. You must complete an access request form prior to using the system. The form can be downloaded from the site. Once you have submitted your access request form, the MEPS security officer will contact you, verify information you have provided and give you a MEPS password.

MONTANA MEDICAID
MANAGED CARE as of
June 2000

Number of PASSPORT Clients	42,535
Number of Clients Pending	*
Number of Clients Age 21 and Older	13,105
Number of Clients Age 20 and Younger	
Number of PASSPORT Providers	
Counties Active in PASSPORT	52

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UPCOMING MAXIMUS ON-SITE VISITS!

To promote a productive and educational communication line regarding Montana Managed Care, Montana Health Choices/MAXIMUS is scheduling visits with PASSPORT providers and county offices of Public Assistances. As visits are scheduled, our Provider Relations staff will send an agenda listing items that will be discussed and the day and time the meeting has been scheduled. Our summer schedule is as follows:

July: Beaverhead, Madison, Dawson, Sheridan, Daniels, Richland, Choteau, Hill Counties; Rocky Boy, Fort Peck and Blackfeet Indian Health Services.

August: Gallatin, Park, Sweet Grass, Still Water, Carbon, Big Horn Counties and Fort Belknap, Rocky Boy and Crow Indian Health Services.

September: Missoula and Sanders Counties.

Please look forward to Maria Rogne or Maureen O'Reilly scheduling a visit with your office during these months. Or, if you would prefer, you may contact us directly to request a visit. You can contact Montana Health Choices at **1-800-480-6823**.

Montana Health Choices looks forward to meeting with you and discussing the Medicaid Managed Care program!

IMMUNIZATION INFORMATION



A schedule of upcoming **Immunization Satellite Broadcasts** is as follows:

Preparing for the Next Influenza Pandemic, Thursday, July 13, 2000 from 10:00-12:30 Mountain Standard Time.

Immunization Update 2000, Thursday, September 14, 2000 from 10:00-12:30 Mountain Standard Time.

Surveillance of Vaccine Preventable Diseases, Friday, December 8, 2000 from 10:00-1:30 Mountain Standard Time.

All conferences are hosted by the National Immunization Program. This is an excellent opportunity for you and your staff to learn first hand about immunization issues and updates.

If you are interested in attending, please contact your local public health nurse, tribal health nurse, or Beth Cottingham at the Montana Immunization Program - phone: **406-444-2969**; or e-mail ecottingham@state.mt.gov. All programs will be video taped and available on loan.

"This is a wonderful program, I'm totally happy - wouldn't change a thing."



"You all are very helpful. Thank you alot. My kids also get good care."

... an excerpt from a page of good words about Great Falls Dr. Angela Mills ... "My wife and I are very impressed with Dr. Angela Mills."

~ comments received from Medicaid Clients



CHIP PROGRAM CHANGES



Several changes have been made to improve CHIP (Children's Health Insurance Plan) and to decrease the barriers to enrollment. These changes will benefit families who participate in CHIP and those who provide services.

The first change is the discontinuation of the enrollment fee. After June 1, 2000, families no longer pay an enrollment fee to apply. Some families pay a co-payment when children receive services; the annual family co-payment cap increased from \$200.00 to \$215.00

Another change is an increase in the annual dental benefit from \$200.00 to \$350.00. Dentists indicated that the new limit would allow them to provide needed services to those children who are current patients. Jackie Forba of the CHIP staff developed a dental booklet for CHIP families and a Provider Manual for CHIP dentists. These publications are a great addition to our successful CHIP dental program.

As a result of federal guidelines, Native Americans will no longer be required to make copayments. Those that were enrolled before June 1, 2000 will receive a new BlueCHIP card indicating they no longer have a co-payment.

Income disregards are now being applied for families who have working parents and families that pay for dependent care. Families can deduct \$120.00 per month for each working parent before they apply their income to the income guidelines. They can also deduct up to \$200.00 a month for each dependent for whom they are currently paying for dependent care.

Outreach efforts are continuing on many fronts. CHIP expects to be very close to the goal of 9,725 children enrolled by the end of 2000. One very successful outreach effort has been for providers to give information about CHIP to their patients. Many providers have current patients who are eligible for CHIP but are not enrolled; those families might even be having trouble paying bills. The family participation in CHIP helps both that family and the provider. If you need information or brochures to pass out please contact Ernie Saxman, CHIP Outreach Coordinator, **406-444-7877**, or e-mail esaxman@state.mt.us.

DID YOU KNOW... if a Medicaid client goes off of cash assistance, they do not automatically lose Medicaid coverage. This is important because DPHHS is concerned that Medicaid clients remain healthy or get the health care they need.

PASSPORT to Health Program Making the Transition from Medicaid HMOs

-For HMO Health Care Providers in Yellowstone and Cascade Counties-

As you are aware, the Medicaid HMO plan is terminating effective July 1, 2000. We are doing all we can to assure that the necessary changes happen without creating a hardship to our Medicaid clients. Below are a few key points that you will want to remember during the next few months of this transition process:

- O We want to honor all HMO referrals without the client needing to make another appointment with his/her Passport provider to get the referral. If you refer a patient for a service that will not occur until AFTER June 30, 2000, please notify Jackie Thiel, Quality Assurance Program Officer at DPHHS (406) 444-1834 prior to June 30. Please give her the name of the client, his/her ID number and the nature of the referral.
- O If you are also a Passport provider, when you refer your patients for services that will take place after the termination of the HMO program, please include your Passport number as well.
- O We are making changes in our billing system that should capture all of these referrals and pay them. If, however, you are denied a claim for a service for which you had received HMO authorization, please contact Jackie Thiel at DPHHS.
- O If you are an HMO PCP and have Medicaid Managed Care clients enrolled with you, these Medicaid clients have been transferred under your name into the PASSPORT to Health program. When you receive your July 2000 PASSPORT to Health enrollee list from MAXIMUS, Montana Health Choices, you will notice an increase in your patient caseload. These Medicaid HMO clients that have been transferred to you under the PASSPORT to Health program will appear as new clients although they are not actually "new" to your caseload. With the transfer of your HMO clients to your PASSPORT enrollee list, we may need to adjust your PASSPORT to Health caseload limit.
- O The Medicaid clients have been notified that they have been transferred from their PCP under the HMO program to the same PCP under the PASSPORT to Health program.

We appreciate all of you for your patience and for making this transition a success. If you have additional questions, or any concerns regarding this conversion, please call the Montana Health Choices Provider Helpline at **1-800-480-6823**.

MEDICAID PASSPORT TO HEALTH CLIENT NEWSLETTER

We have included a copy of the most recent Medicaid Passport to Health Client Newsletter. This newsletter is produced and mailed to all Medicaid clients who are on the Passport to Health Program. The newsletters are produced quarterly. If you have suggestions for the newsletter, or would like to be a guest author in one of our newsletters, please call the provider helpline at **1-800-480-6823**.